	PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2001 10/069988											
	CLAIMS AS FILED - PART I (Column 1) (Column 2)					umn 2)	SMALL	ENTITY	OR	OTHE	ER THAN L ENTITY	1
Ţ	OTAL CLAIM	s		٠	, 12, 2, 1. ( )		RATI	FEE	_	RATE		┩
F	OŘ		NUMBE	R FILED	NUM	BER EXTRA	BASIC	₹EE	OF		-//-	1
Ŧ	OTAL CHARGE	EABLE CLAIMS	3/1	inus 20=	• 7		XS 9		7		108	1
IN.	DEPENDENT	CLAIMS	6 minus 3 =				X42=			160.0	V.7.	4
M	MULTIPLE DEPENDENT CLAIM PRESENT						A42-	-		X84=	V60	┨
* If the difference in column 1 is less than zero, enter "0" in column 2							+140:		OR	+280=		ŀ
•	,							١	OR	TOTAL		]
_1	Column 1) (Column 2) (Column 3)							L ENTITY	OR		R THAN ENTITY	
<b>AMENDMENT A</b>		REMAINING AFTER AMENDMENT		PREVIO PAID I	BER USLY	PRESENT EXTRA	RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE	
Š	Total	. 30	Minus	-3	<u> </u>	•	X\$ 9=		OR	X\$18=		1
¥	Independent	· / ()	Minus	*** 6	<u> </u>		X42=		OR	X84€	LLX	1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		1	+280=	1	<b>1</b> ′
							TOTA		OR	TOTAL	1 1/2	4
	4-12-09	(Column 1)		(Colum	n 21	(Column 3)	ADDIT. FE	<b>دل</b> ــــــــــــــــــــــــــــــــــــ	704	ADDIT, FEE	LYO	V.J
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER. ISLY	PRESENT EXTRA	RATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL	
XQX	Total	• 15	Minus	3	1		X\$ 9=			X\$18=	FEE	İ
	Independent	• 7:	Minus	-/	0		X42=	1	OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								OR	-25	*	
	• •		•				TOTAL		OR .	TOTAL	1	•
•		(Column 1)		(Columi	<b>.</b> 21	(Column 3)	ADDIT, FEE		Jon '	DOIT. FEE	-	
AMENDMENT C		REMAIRIG AFTER AMENDMENT	And the second	PREVIOU PAID FO	A SLY	PRESENT EXTRA	RATE	TIONAL		RATE	ALO:- TIONAL	
Ž Q Z	Total	•	Vinus	*			X\$ 9=	FEE	_ <u> </u>	X\$18=	FEE	
	Independent		Vinus	***		•			OR			ı İ
1	FIRST PRESE	NTATION OF MUL	X42=	<u>'</u>	OR I	X84=	' <u>!</u>					
• H	If the entry in column 1 is less than the entry in column 2, write "0" in column 3,								OR	+280=		
	" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" BY THIS SPACE is less than 20, enter "20."								OR A	TOTAL DOT, FEE		
T	ne "Highest Num	ber Previously Paid	For (Total or	Independent	is the	ighest number fo	und in the app	propriate box	in colu	nn 1.		

FORM PTO-075 (Nex 201)

Pators and Trademark Office, U.S. DEPARTMENT OF COMMERCE

**Application or Docket Number** 

